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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/690,368			ling Date 16/2000	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛				HER THAN	
	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A		N/A			N/A		
	FAL CLAIMS CFR 1.16(i))		minus 20 =				x s =		OR	x \$ =		
	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 = *			1	x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE she is \$ add	ets of pap 250 (\$125 tional 50 :	er, the application for small ent sheets or fraction	wings exceed 100 ation size fee due ity) for each ction thereof. See 37 CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									1			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL		
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	07/07/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT Y EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	• 41	Minus	·· 45	=	1	x s =		OR	x s =		
	Independent (37 CFR 1,16(h))	• 6	Minus	9	=	1	x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT LY EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())	*	Minus	**	=]	x s =		OR	x s =		
M	Independent (37 CFR 1.16(h))	•	Minus	***	=]	x \$ =		OR	x \$ =		
Ш	Application Size Fee (37 CFR 1.16(s))]]			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						TOTAL		OR			
. 16	# If the eate, in column 1 is less than the eate, in column 2 units 107 in a 1								OR	TOTAL ADD'L FEE		
** If	"If the entry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examinier: "If the "Highest Number Previously Paid For IM THIS SPACE is less than 30, enter "20". "If the "Highest Number Previously Paid For IM THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IM THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IM THIS SPACE is less than 5, enter "3". The "Highest Number Previously Paid For IM THIS SPACE is less than 5, enter "3".											

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